



**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicants: Peter M. Glazer and Pamela A. Havre

Express Mail Label No.: EV 487330600 US

Serial No.: 09/783,338

Date of Deposit: January 26, 2006

Filed: February 14, 2001

Art Unit: 1637

Examiner: Jeffrey Norman Fredman

For: *CHEMICALLY MODIFIED OLIGONUCLEOTIDE FOR SITE-DIRECTED MUTAGENESIS*

Mail Stop Issue Fee  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**TRANSMITTAL OF ISSUE FEE**

Sir:

In response to the Notice of Allowance and Fee(s) Due mailed on October 28, 2005, transmitted herewith are the (1) Issue Fee Transmittal Form PTOL-85B; (2) Fee Transmittal; (3) authorization for the Commissioner to charge the amount of \$1,015.00 to Deposit Account No. 50-3129 in payment of the (a) \$700.00 issue fee for a small entity, (b) \$300.00 publication fee, and (c) \$15.00 fee for five (5) copies of the patent; (4) Revocation of Power of Attorney

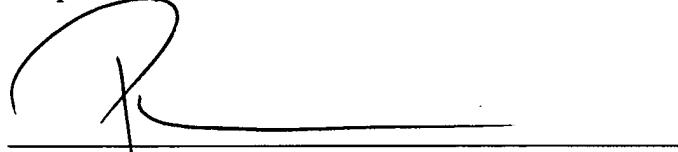
U.S.S.N.: 09/783,338  
Filed: February 14, 2001  
**TRANSMITTAL OF ISSUE FEE**  
Express Mail Label No.: EV 487330600 US  
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With New Power of Attorney and Change of Correspondence Address Form; and (5) Statement Under 37 CFR 3.73(b) with copy of Assignment.

This application is entitled to claim small entity status pursuant to 37 C.F.R. § 1.27.

The Commissioner is hereby authorized to charge any additional fees or credit any overpayment in connection with this patent application to Deposit Account No. 50-3129.

Respectfully submitted,



\_\_\_\_\_  
Patrea L. Pabst  
Registration No. 31,284

Date: January 26, 2006

PABST PATENT GROUP LLP  
400 Colony Square, Suite 1200  
1201 Peachtree Street  
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**CERTIFICATE OF MAILING UNDER 37 C.F.R. § 1.10**

I hereby certify that this Transmittal of Issue Fee and any documents referred to as attached therein are being deposited with the United States Postal Service on this date, January 26, 2006, in an envelope as "Express Mail Post Office to Addressee" service under 37 C.F.R. § 1.10, Express Mail Label No. EV 487330600 US, addressed to Mail Stop Issue Fee, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Chandra Russell  
Chandra Russell

Date: January 26, 2006

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JAN 26 2006  
O I P E 14P78  
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U. S. P A T E N T & T R A D E M A R K O F F I C E

**Effective on 12/08/2004.**  
*Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).*

# **FEE TRANSMITTAL**

## **For FY 2005**

 Applicant claims small entity status. See 37 CFR 1.27**TOTAL AMOUNT OF PAYMENT** (\$ 1,015.00)**Complete if Known**

Application Number	09/783,338
Filing Date	February 14, 2001
First Named Inventor	Peter M. Glazer
Examiner Name	Jeffrey Norman Fredman
Art Unit	1637
Attorney Docket No.	YU 109 CON

**METHOD OF PAYMENT** (check all that apply)

Check  Credit Card  Money Order  None  Other (please identify): \_\_\_\_\_

Deposit Account Deposit Account Number: 50-3129 Deposit Account Name: Pabst Patent Group LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below  Charge fee(s) indicated below, except for the filing fee

Charge any additional fee(s) or underpayments of fee(s)  Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

**FEE CALCULATION****1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<b>Application Type</b>	<b>FILING FEES</b>		<b>SEARCH FEES</b>		<b>EXAMINATION FEES</b>		
	<b>Small Entity</b>	<b>Fee (\$)</b>	<b>Small Entity</b>	<b>Fee (\$)</b>	<b>Small Entity</b>	<b>Fee (\$)</b>	<b>Fees Paid (\$)</b>
Utility	300	150	500	250	200	100	_____
Design	200	100	100	50	130	65	_____
Plant	200	100	300	150	160	80	_____
Reissue	300	150	500	250	600	300	_____
Provisional	200	100	0	0	0	0	_____

**2. EXCESS CLAIM FEES****Fee Description**

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

Multiple dependent claims

<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Multiple Dependent Claims</b>	
				<b>Small Entity</b>	<b>Fee (\$)</b>
9 - 20 or HP =	0	x	=	Fee (\$)	Fee Paid (\$)

HP = highest number of total claims paid for, if greater than 20

<b>Indep. Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Multiple Dependent Claims</b>	
				<b>Small Entity</b>	<b>Fee (\$)</b>
1 - 3 or HP =	0	x	=	Fee (\$)	Fee Paid (\$)

HP = highest number of independent claims paid for, if greater than 3

**3. APPLICATION SIZE FEE**

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<b>Total Sheets</b>	<b>Extra Sheets</b>	<b>Number of each additional 50 or fraction thereof</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
- 100 =	/ 50 =	(round up to a whole number) x	=	

**4. OTHER FEE(S)**

Non-English Specification, \$120 fee (no small entity discount)

Other: Issue Fee (\$700.00), Publication Fee (\$300.00) and five copies of patent (\$15.00)

**Fees Paid (\$)**

\$1,015.00

**SUBMITTED BY**

Signature		Registration No. (Attorney/Agent)	31,284	Telephone (404) 879-2151
Name (Print/Type)	Patreia L. Pabst		Date	January 26, 2006

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.



PTO/SB/21 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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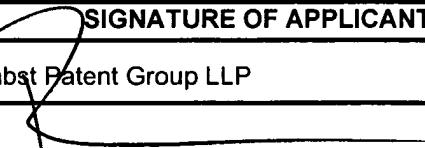
## TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Application Number	09/783,338		
Filing Date	February 14, 2001		
First Named Inventor	Peter M. Glazer		
Art Unit	1637		
Examiner Name	Jeffrey Norman Fredman		
Total Number of Pages in This Submission	12	Attorney Docket Number	YU 109 CON

ENCLOSURES (Check all that apply)				
<input checked="" type="checkbox"/> Fee Transmittal Form  <input type="checkbox"/> Fee Attached  <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)  <input type="checkbox"/> Extension of Time Request  <input type="checkbox"/> Express Abandonment Request  <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s)  <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers  <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address  <input type="checkbox"/> Terminal Disclaimer  <input type="checkbox"/> Request for Refund  <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC  <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences  <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)  <input type="checkbox"/> Proprietary Information  <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):  Transmittal of Issue Fee; Certificate of Mailing Under 37 CFR 1.10; Issue Fee Transmittal PTOL-85B; Statement Under 37 CFR 3.73(b) with copy of Assignment.	Remarks	
				<input type="checkbox"/>

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Pabst Patent Group LLP		
Signature			
Printed name	Patricia L. Pabst		
Date	January 26, 2006	Reg. No.	31,284

### CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below:

Signature	SEE CERTIFICATE OF MAILING UNDER 37 CFR 1.10		
Typed or printed name			Date

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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